

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, ASB TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

THIS SPACE FOR OFFICE USE ONLY

'06 MAR 13 A10:50

ACLIV

STATE OF HAWAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST					
NAME(Last)	(First)	(Middle)	TELEPHONE		
Brady	Kathleen		522-5900		
MAILING ADDRESS (Street)			FAX		
P.O. Box 3410			522-5909		
(City)	(State)	(Zip	Code)		
Honolulu	Hawai'i	9	96801		
EMPLOYING ORGANIZATION (Fill in only	y if you are employed by a business entity	which has been retained to lobby)	TELEPHONE		
MAILING ADDRESS (Street)			FAX		
(City)	(State)	(Zip	Code)		

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOB	TELEPHONE	
American Civil L	iberties Union of Hawai'i	522-5900
MAILING ADDRESS (Street)		FAX
P.O. Box 3410		522-5909
(City)	(State)	(Zip Code)
Honolulu	Hawai'i	96801
NAME OF PERSON RESPONSIBLE FOR	TELEPHONE TELEPHONE	
Vanessa Y. Chong	522-5900	
MAILING ADDRESS (Street)	FAX	
P.O. Box 3410		522-5909
(City)	(State)	(Zip Code)
Honolulu	Hawai'i	96801

PART	III DESCRIPTION O	F SUBJECT	S UPON WHICH	YOU	EXPECT TO LOBBY			
	Agriculture	Educa	tion		Human Services		Science, Technology & Economic Development	
<u> </u>	Communications & Public Utilities	Gover	nment Operations & ce		Intergovernmental Relation International Affairs	ıs,	Tourism & Recreation	
	Consumer Protection & Commerce	Hawai	ian Affairs		Labor & Employment		Transportation	
	Culture, Arts, Historic Preservation	Health			Planning, Land & Water Use Management		Other: (indicate below)	
	Ecology, Energy Environmental Protection	Housi	ng	X	Public Safety & Corrections	s		
PART	IV CERTIFICATION	OF LOBBY	IST					
	nereby certify that the i			, to the	best of my knowledg	e, correct	and complete.	
	· Kar S				,		·	
	1/11/2	(Signature of L	abby dat		Marc	$\frac{h}{\sqrt{2}}$	006	
		(Signatur y of L	.oobyist)			(Date)		
PART	V AUTHORIZATION	TO LOBBY						
NAME	AOTHORIZATION	TO LOBB		TITLE	OF AUTHORIZING OFFIC	ER OR PE	RSON REPRESENTED	
Vai	nessa Y. Chong		Vanessa Y. Chong Executi			ve Director		
NAME	NAME OF ORGANIZATION (if applicable)				Executive Dile	ctor		
American Civil Liberties Union of Hawai'i						TELEPHON	IE .	
Ame		,	Union of Ha					
	erican Civil Li	,	Union of Ha		i	TELEPHON		
MAILIN		,	Union of Ha		i	TELEPHON	900	
MAILIN	erican Civil Li	,	Union of Ha		i	522-5 FAX 522-5	900	
MAILIN P.(erican Civil Li GADDRESS (Street) D. Box 3410 City) nolulu	berties	(State)	wai'	i (Zip Co	522-5 FAX 522-5 ode)	900	
MAILIN P.(erican Civil Li GADDRESS (Street) O. Box 3410 City)	berties	(State)	wai'	i (Zip Co	522-5 FAX 522-5 ode)	900	
MAILIN P.(erican Civil Li GADDRESS (Street) D. Box 3410 City) nolulu	berties	(State)	wai'	i (Zip Co g bbying activities on bo	522-5 FAX 522-5 ode)	900 909 e undersigned.	